

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 02/2015)				TRANSCRIPT ORDER Please use one form per court reporter. CJA counsel please use Form CJA24 Please read instructions on next page.				COURT USE ONLY DUE DATE:						
1a. CONTACT PERSON FOR THIS ORDER Archana R. Acharya		2a. CONTACT PHONE NUMBER (213) 972-4560		3. CONTACT EMAIL ADDRESS aacharya@foley.com										
1b. ATTORNEY NAME (if different)		2b. ATTORNEY PHONE NUMBER		3. ATTORNEY EMAIL ADDRESS										
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Eileen Ridley (Foley & Lardner LLP) 555 California Street, Ste. 1700 San Francisco, CA 94104				5. CASE NAME Atain Specialty Insurance Co. v. Douglas Ross Constr		6. CASE NUMBER 5:14-cv-04056								
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) → <input type="checkbox"/> FTR Summer Fisher				8. THIS TRANSCRIPT ORDER IS FOR: <input checked="" type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL CJA: Do not use this form: use Form CJA24.										
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:														
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)		c. DELIVERY TYPE (Choose one per line)								
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
01/30/2015	RMW	Motion	Entire transcript	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC: Transcript is required for appeal.														
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).										12. DATE 04/21/2015				
11. SIGNATURE /s/ Archana R. Acharya														
DISTRIBUTION: <input type="checkbox"/> COURT COPY <input type="checkbox"/> TRANSCRIPTION COPY <input type="checkbox"/> ORDER RECEIPT <input type="checkbox"/> ORDER COPY														